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Mail stop REC  
Commissioner for PatentsP.O. Box 1450  
Alexandria, VA 22313-1450Date 9 / 25 / 03  
Mo. Day Yr.  
Atty. Docket 00644-003216  
Application No. 681909 283Sir:  
Kindly acknowledge receipt of the accompanying:

FCH-8-0

- ☐ Response to Official Action. REC
- ☒ Check for \$ 700.00 (Minimum fee) 4 Check for \$ 246.00 Add claims  
Fees
- ☐ Petition under 37 CFR 1.136 and Check for \$ \_\_\_\_\_
- ☐ Notice of Appeal and Check for \$ \_\_\_\_\_
- ☐ Information Disclosure Statement, PTO-1449 and \_\_\_\_\_ documents
- ☐ Claim for priority and certified copies of \_\_\_\_\_ priority applications
- ☒ Issue fee transmittal and Check for \$ \_\_\_\_\_  
Other (specify) Request for continued examination (REC)  
for priority + Preliminary Amendment  
by placing your receiving date stamp hereon and mailing or returning to deliver.
- Atty. FCH RD Due Date 9/25/03  
Mo. Day Yr.
- 37 CFR 1.8 ☒  
37 CFR 1.10 ☐  
By Hand ☐

In re Application of:

Docket No. 00684.003256.

TAKEHIKO NAKAI

Application No.: 09/960,283

Examiner: Leonidas Boutsikaris

Filed: September 24, 2001

Group Art Unit: 2872

For: DIFFRACTIVE OPTICAL ELEMENT  
AND OPTICAL SYSTEM HAVING  
THE SAME

Date: September 25, 2003

Mail Stop RCE  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 35	MINUS	** 26	= 9	x \$9 \$18	162.00
INDEP. CLAIMS	* 4	MINUS	*** 3	= 1	x \$42 \$84	84.00
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						246.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 246.00 is enclosed.
- ☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant

Registration No. 29 286

FITZPATRICK, CELLA, HARPER & SCINTO  
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New York, New York 10112-3801  
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